Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

| CLAIMS AS FILED - PART I | | | | | | | SMALL ENTITY | | | OTHER THAN | | |
|---|--|---|-------------------------|-------------------------------|---|-------------------|--------------|---------------------|------------------------|------------|---------------------|------------------------|
| | | | (Column 1) | | (Column 2) | | 1 | TYPE | | OR | SMALL ENTITY | |
| TOTAL CLAIMS | | | 20 | | The state of the state of | | | RATE | FEE |] [| RATE | FEE |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| TOTAL CHARGEABLE CLAIMS | | | \mathcal{Q} minus 20= | | * | | | X\$ 9= | | OR | X\$18= | |
| INDEPENDENT CLAIMS | | | | nus 3 = | * | | | X42= | | OR | X84= | |
| ML | ILTIPLE DEPEN | DENT CLAIM P | RESENT | | | | | +140= | | OR | +280= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | |
| CLAIMS AS AMENDED - PART II | | | | | | | | OTHER THAN | | | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL | ENTITY | OR | SMALL | ENTITY |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | IBER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| NDR | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| AME | Independent | * NTATION OF M | Minus | Minus *** _TIPLE DEPENDENT | | = | | X42= | | OR | X84= | |
| <u>L</u> | THOTTREE | TOTAL OF THE | OEIII EE DEI | LINDEN | | | ¹ | +140=. | | OR | +280= | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | (Column 3) | • | NUDII. FEC | | و | | | | | | |
| | | CLAIMS HIC | | HIGH | | | | | ADDI- |] [| | ADDI- |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | | PREVI | IBER OUSLY FOR | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | TIONAL FEE |
| NDE | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| \ME | Independent | * | Minus | *** | | = | | X42= | | OR | X84= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | | |
| | | | | | | | | +140= | | OR | +280= | |
| TOTAL ADDIT. FEE | | | | | | | | | | OR | TOTAL ADDIT. FEE | |
| (Column 1) (Column 2) CLAIMS HIGHEST | | | | | | | | ALLARIECOPY | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | HEST ON THE STATE OF THE STATE | PRESENT | { | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | | X42= | | OR | X84= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= | | | | | | | | | | +280= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | OR | | <u></u> |
| | If the "Highest Nu | ımber Previously F | aid For" IN THI | S SPACE | is less tha | an 20, enter "20. | ." / | ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | *If the "Highest Nu The "Highest Nur | mber Previously Pa | aid For" (Total o | r Independ | dent) is the | e highest numbe | er fou | und in the app | propriate bo | x in co | olumn 1. | |